## Case 24-11994 Doc 1 Filed 06/11/24 Entered 06/11/24 12:35:25 Desc Main Document Page 1 of 44

| Fill in this information to identify your                      | case:   |                                      |
|--|---|--------------------------------------|
| United States Bankruptcy Court for t  Eastern District of Penn |   |                                      |
| Case number (If known):  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| -1  |  |  |   |
|-----|--|--|---|
| Par | t 1: Identify Yourself   |  |   |
|     |  | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   | James                                    |   |
|     | Write the name that is on your   | First name                               | First name                                    |
|     | government-issued picture  | Harold                                   |   |
|     | identification (for example, your driver's license or passport).                                   | Middle name                              | Middle name                                   |
|     | ,  | Cooper                                   |   |
|     | Bring your picture identification to your meeting with the trustee.                                | Last name                                | Last name                                     |
|     |  | Suffix (Sr., Jr, II, III)                | Suffix (Sr., Jr, II, III)                     |
| 2.  | All other names you have used in the last 8 years  | First name                               | First name                                    |
|     | •  | 1 list hallo                             | The thame                                     |
|     | Include your married or maiden<br>names and any assumed, trade<br>names and doing business as      | Middle name                              | Middle name                                   |
|     | names.   | Last name                                | Last name                                     |
|     | Do NOT list the name of any  |  |   |
|     | separate legal entity such as a corporation, partnership, or LLC that is not filing this petition. | Business name (if applicable)            | Business name (if applicable)                 |
|     |  | Business name (if applicable)            | Business name (if applicable)                 |
| 3.  | Only the last 4 digits of your<br>Social Security number or<br>federal Individual Taxpayer         | xxx - xx - 8 2 2 4<br>xxx - xx - 8 2 2 4 | xxx - xx                                      |
|     | Identification number  | OR                                       | OR  |
|     | (ITIN)   |  |   |
|     |  | 9xx - xx                                 | 9xx - xx                                      |

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| Deb | otor 1 James                      | Harold                  | Cooper  | Case number (if known)   |  |  |  |
|-----|-----------------------------------|-------------------------|---|--|--|--|--|
|     | First Name                        | Middle Name             | Last Name   | •  |  |  |  |
|     |                                   | About Debtor 1          | :   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |
| 4.  | Your Employer Identification      | n                       |   |  |  |  |  |
|     | Number (EIN), if any.             | <u> </u>                |   | EIN  |  |  |  |
|     |                                   | <br>EIN                 |   |  |  |  |  |
| 5.  | Where you live                    |                         |   | If Debtor 2 lives at a different address:  |  |  |  |
|     | •                                 | 24 Beech St             |   |  |  |  |  |
|     |                                   | Number Si               | treet   | Number Street  |  |  |  |
|     |                                   | Pottstown, F            | PA 19464-5402   |  |  |  |  |
|     |                                   | City                    | State ZIP Code  | City State ZIP Code  |  |  |  |
|     |                                   | Montgomery              | ,   |  |  |  |  |
|     |                                   | County                  |   | County   |  |  |  |
|     |                                   |                         | address is different from the one aboute that the court will send any notices ng address. |  |  |  |  |
|     |                                   | Number St               | reet  | Number Street  |  |  |  |
|     |                                   | P.O. Box                |   | P.O. Box   |  |  |  |
|     |                                   | City                    | State ZIP Code  | City State ZIP Code  |  |  |  |
| 6.  | Why you are choosing <i>thi</i> s | Check one:              |   | Check one:   |  |  |  |
|     | district to file for bankrupto    | Over the last           | st 180 days before filing this petition, I<br>n this district longer than in any other    | Over the last 180 days before filing this petition, I<br>have lived in this district longer than in any other<br>district. |  |  |  |
|     |                                   | I have anot (See 28 U.S | her reason. Explain.<br>S.C. § 1408)  | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408)   |  |  |  |
|     |                                   |                         | _   |  |  |  |  |
|     |                                   |                         |   |  |  |  |  |
|     |                                   |                         |   |  |  |  |  |

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| Debtor 1 James |   | Harold  | Cooper   | mber (if known)  |  |  |
|----------------|---|---|--|--|--|--|
|                | First Name  | Middle Name   | Last Name  |  |  |  |
|                |   |   |  |  |  |  |
| Par            | t 2: Tell the Court A   | bout Your Bankrupto   | y Case   |  |  |  |
| 7.             | The chapter of the Ba<br>Code you are choosin<br>under  |   | orm 2010)). Also, go to the t<br>7<br>11<br>12   | n, see <i>Notice Required by 11 U.S.C</i><br>top of page 1 and check the approp  |  |  |
| 8.             | How you will pay the f  | details ab check, or a credit ca least to Pay Th lead to judge may official por choose th | out how you may pay. Typicomoney order. If your attorned and or check with a pre-printed pay the fee in installments. The Filing Fee in Installments (attact my fee be waived (You or, but is not required to, waiverty line that applies to you | ally, if you are paying the fee yours y is submitting your payment on yo ed address.  If you choose this option, sign and (Official Form 103A).  may request this option only if you | our income is less than 150% of the pay the fee in installments). If you               |  |
| 9.             | Have you filed for bar<br>within the last 8 years   | ?  ✓ Yes. Distri  | Eastern District of Pennsylvania Eastern District of Pennsylvania  | When 03/25/2024  MM / DD / YYYY When 05/28/2024  MM / DD / YYYY When  MM / DD / YYYY   | Case number <b>24-11808-pmm</b>  |  |
| 10.            | Are any bankruptcy c<br>pending or being filed<br>spouse who is not filit<br>case with you, or by a<br>business partner, or b<br>affiliate? | by a ang this Yes. Debt   | ct   | When When When MM / DD / YYYY  | Relationship to you  Case number, if known  Relationship to you  Case number, if known |  |
| 11.            | Do you rent your resid  | Yes. Has  | No. Go to line 12.   | eviction judgment against you?<br>In the About an Eviction Judgment Aga<br>etition.  | nst You (Form 101A) and file it  |  |

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| Debtor 1 James   |  | Harold  | Cooper   | Case number (if known)  |  |  |  |  |
|--|--|---|--|---|--|--|--|--|
|  | First Name   | Middle Nam  | e Last Name  |   |  |  |  |  |
| Par  | t 3: Report About Any Busin  | iesses You  | u Own as a Sole Proprietor   |   |  |  |  |  |
| 12.  | Are you a sole proprietor of   | ☑ No. G   | o to Part 4.   |   |  |  |  |  |
|  | any full- or part-time business?   | ☐ Yes. N  | lame and location of business  |   |  |  |  |  |
|  | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a separate<br>legal entity such as a<br>corporation, partnership, or LLC. |   | Name of business, if any   |   |  |  |  |  |
|  | If you have more than one sole   | Numbe   | r Street   |   |  |  |  |  |
|  | proprietorship, use a separate sheet and attach it to this   |   |  |   |  |  |  |  |
|  | petition.  | City  |  | State   | ZIP Code   |  |  |  |
|  |  | Check the appropriate box to describe your business:            |  |   |  |  |  |  |
|  |  | □ н   | ealth Care Business (as defined in 11 U  | J.S.C. § 101(27   | A))  |  |  |  |
|  |  | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) |  |   |  |  |  |  |
|  |  | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))              |  |   |  |  |  |  |
|  |  | ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))           |  |   |  |  |  |  |
|  |  | ☐ None of the above   |  |   |  |  |  |  |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?  If you are filing under Chapter 11, the court must know whether you are a small business to the court must kn |  |   |  | ines. If you indicate that you are a small business must attach your most recent balance sheet, statement |  |  |  |  |
|  | For a definition of small business   | ☑ No.   | I am not filing under Chapter 11.  |   |  |  |  |  |
|  | debtor, see 11 U.S.C. § 101(51D).  | ☐ No.   | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. |   |  |  |  |  |
|  |  | ☐ Yes.  | I am filing under Chapter 11, I am a s<br>Bankruptcy Code, and I do not choos  |   | debtor according to the definition in the nder Subchapter V of Chapter 11. |  |  |  |
|  |  | ☐ Yes.  | I am filing under Chapter 11, I am a c   |   | g to the definition in § 1182(1) of the Bankruptcy                         |  |  |  |

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| Deb | tor 1   | James  | Harold       | Cooper                  |                | Case n              | umber (if known) |          | _ |
|-----|---|--|--------------|-------------------------|----------------|---------------------|------------------|----------|---|
|     |   | First Name   | Middle Name  | Last Name               |                |                     | , ,              |          |   |
| Par | t 4: Repor  | t if You Own or Ha   | ave Any Haza | ardous Property or      | Any Propert    | ty That Needs Immed | diate Attention  |          |   |
| 14. | •   | n or have any  | ✓ No.        |                         |                |                     |                  |          |   |
|     | property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? |  | ☐ Yes. W     | hat is the hazard?      |                |                     |                  |          |   |
|     |   |  |              |                         |                |                     |                  |          |   |
|     |   |  | lf i         | mmediate attention is r | needed. why is | it needed?          |                  |          |   |
|     |   | e, do you own  |              |                         |                |                     |                  |          |   |
|     | that must be  | goods, or livestock<br>e fed, or a building<br>urgent repairs? |              |                         |                |                     |                  |          |   |
|     |   |  | WI           | here is the property?   |                |                     |                  |          |   |
|     |   |  |              |                         | Number         | Street              |                  |          |   |
|     |   |  |              |                         |                |                     |                  |          |   |
|     |   |  |              |                         | City           |                     | State            | ZIP Code |   |

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| Debtor 1 | James      | Harold      | Cooper    | Case number (if known) |  |
|----------|------------|-------------|-----------|------------------------|--|
|          | First Name | Middle Name | Last Name | ,,                     |  |

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling. The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### About Debtor 1:

#### You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

## I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

#### You must check one:

| I received a briefing from an approved credit    |
|--|
| counseling agency within the 180 days before I   |
| filed this bankruptcy petition, and I received a |
| certificate of completion.                       |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

## I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Debtor 1 <b>J</b> |   | James  | Harold Cooper                     |  |  | Case number (if known)   |         |  |
|-------------------|---|--|-----------------------------------|--|--|--|---------|--|
| First Name N      |   | Middle Name Last Name  |                                   |  |  |  |         |  |
|                   |   | TI 0 11  | . 5                               |  |  |  |         |  |
| Par               | t 6: Answe                                  | r These Question   | is for R                          | eporting Purposes  |  |  |         |  |
| 16.               | What kind o have?                           | f debts do you   | 16a.                              |  |  | ner debts? Consumer debts are de<br>for a personal, family, or househo   |         |  |
|                   |   |  |                                   |  |  |  |         |  |
|                   |   |  | 16b.                              | for a business or investment of  |  | s debts? Business debts are debt<br>rough the operation of the busines   |         |  |
|                   |   |  |                                   | No. Go to line 16c. Yes. Go to line 17.  |  |  |         |  |
|                   |   |  | 16c.                              | State the type of debts you ow   | ve th  | at are not consumer debts or busi  | ness d  | lebts.   |
| 17.               | Are you filin                               | g under Chapter 7?   | <b>√</b>                          | No. I am not filing under Cha  | apter  | 7. Go to line 18.  |         |  |
|                   | exempt prop<br>and adminis<br>paid that fur | nate that after any<br>perty is excluded<br>trative expenses ar<br>ids will be available<br>ion to unsecured |                                   |  | ter 7. Do you estimate that after any exempt property is excluded and es are paid that funds will be available to distribute to unsecured creditors? |  |         |  |
| 18.               | How many o                                  | reditors do you<br>t you owe?  | <b>3</b>                          | 1-49   | 0  |  |         |  |
| 19.               | How much c<br>assets to be                  | lo you estimate you<br>worth?  |                                   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million |  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |         | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |
| 20.               | liabilities to                              |  | ır 💟                              | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million |  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |         | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |
| Par               | t 7: Sign Be                                | elow   |                                   |  |  |  |         |  |
| For               | r you                                       | If I have<br>States 0<br>If no atto  | chosen<br>Code. I ur<br>orney rep | to file under Chapter 7, I am awnderstand the relief available un                  | vare<br>nder<br>or ag  | each chapter, and I choose to pro<br>ree to pay someone who is not an  | ler Cha | apter 7, 11,12, or 13 of title 11, United  |
|                   |   | I unders   | tand mal                          | king a false statement, conceal  | ing <sub>l</sub>   | e 11, United States Code, specified<br>property, or obtaining money or pro<br>or imprisonment for up to 20 years   | perty   | ·  |
|                   |   | <b>X</b> <u>,</u>  | s/ Lace                           | y Cooper  Next Friend of Debtor 1  |  |  |         |  |
|                   |   | E  | xecuted                           | on <u>06/10/2024</u><br>MM/ DD/ YYYY   |  |  |         |  |

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| Debtor 1    | James   | Harold   | Cooper  | Case number (if known)  |
|-------------|---|--|---|---|
|             | First Name  | Middle Name  | Last Name   |   |
| represented | torney, if you are<br>d by one<br>ot represented by an<br>ou do not need to file this | proceed under<br>each chapter for<br>11 U.S.C. § 34  | Chapter 7, 11, 12, or 13 of or which the person is eligibate 2(b) and, in a case in which | his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect. |
|             |   | X /a/ Mich   | ael A. Cibik  | Data 06/10/2024   |
|             |   |  | of Attorney for Debtor  | Date <u>06/10/2024</u><br>MM / DD / YYYY  |
|             |   | Michael Printed na Cibik La Firm name 1500 Wa Number | me<br>w, P.C.   |   |
|             |   | <u>Philadel</u>                                      | phia  | PA 19102  |
|             |   | City   |   | State ZIP Code  |
|             |   | Contact ph   | none <u>(215) 735-1060</u>  | Email address help@cibiklaw.com   |
|             |   | 23110  |   | PA  |
|             |   | Bar numbe  | er  | State   |

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|                     |                         | Do                    | cument Pa   | age 9 of 44  | _ |                     |
|---------------------|-------------------------|-----------------------|-------------|--------------|---|---------------------|
| Fill in this inform | nation to identify your | case and this filing: |             |              |   |                     |
| Debtor 1            | James                   | Harold                | Cooper      |              |   |                     |
|                     | First Name              | Middle Name           | Last Name   |              |   |                     |
| Debtor 2            |                         |                       |             |              |   |                     |
| (Spouse, if filing) | First Name              | Middle Name           | Last Name   |              |   |                     |
| United States Ba    | nkruptcy Court for the: | Eastern               | District of | Pennsylvania |   |                     |
| Case number         |                         |                       |             |              |   | Check if this is an |
|                     |                         |                       |             |              |   | amended filing      |
| Official For        | m 106A/B                |                       |             |              |   |                     |

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1:      | Describe Each Residenc  | e, Building, Land, or Other Real Estate   | You Own or Have an  | Interest In                           |  |
|----|------------|---|---|---|---------------------------------------|--|
| 1. | Do y       | ou own or have any legal or equitabl  | e interest in any residence, building, land, or simil   | ar property?  |                                       |  |
|    |            | No. Go to Part 2.   |   |   |                                       |  |
|    | <b>√</b> Y | es. Where is the property?  |   |   |                                       |  |
|    | 1.1        | 24 Beech St Street address, if available, or other  | ✓ Single-family home  t  1  1  1  1  1  1  1  1  1  1  1  1   | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair  | ed claims on Schedule D:              |  |
|    |            | description   | <ul><li>☐ Condominium or cooperative</li><li>☐ Manufactured or mobile home</li><li>☐ Land</li></ul>           | Current value of the entire property?   | Current value of the portion you own? |  |
|    |            |   | ☐ Investment property   | \$143,344.00  | \$143,344.00                          |  |
|    |            | Pottstown, PA 19464-5402           City         State         ZIP Code           Montgomery | ☐ Timeshare ☐ Other Who has an interest in the property? Check one.   | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |                                       |  |
|    |            | County  | Debtor 1 only   | Fee Simple  |                                       |  |
|    |            | ,   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another                              | Check if this is community property (see instructions)  |                                       |  |
|    |            |   | Other information you wish to add about this ite property identification number:                              | m, such as local  |                                       |  |
|    |            |   | Source of Value: Long & Foster (\$179,180 les   | ss 20% closing costs)   |                                       |  |
| 2. |            |   | wn for all of your entries from Part 1, including any umber here  |   | \$143,344.00                          |  |
| Pa | rt 2:      | Describe Your Vehicles  |   |   |                                       |  |
| _  |            |   | nterest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Control | •   | s                                     |  |
| 3. | Ca         | rs, vans, trucks, tractors, sport utility   | y vehicles, motorcycles   |   |                                       |  |
|    |            | No  |   |   |                                       |  |
|    |            | Yes   |   |   |                                       |  |

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Debtor Cooper, James Harold Case number (if known)

| 4.   |   | tor homes, ATVs and other recreational vehicles, other vehicles, and accessories, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories |   |
|------|---|---|---|
| 5.   | Add the dollar value of you have attached for F | the portion you own for all of your entries from Part 2, including any entries for pages art 2. Write that number here  | \$0.00  |
| Pa   | rt 3: Describe Yo                               | ur Personal and Household Items   |   |
| Do y | ou own or have any legal o                      | or equitable interest in any of the following items?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.   | _   | es, furniture, linens, china, kitchenware   |   |
|      | ☑ No ☑ Yes. Describe                            | Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.   | \$950.00  |
| 7.   | •   | d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ctronic devices including cell phones, cameras, media players, games    |   |
|      | ✓ Yes. Describe                                 | Various used televisions, mobile devices, and computers, each valued at \$600 or less.  | \$350.00  |
| 8.   | Collectibles of value                           |   |   |
|      |   | gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or collections; other collections, memorabilia, collectibles      |   |
| 9.   | Equipment for sports and                        | l hobbies   |   |
|      |   | raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and try tools; musical instruments                                     |   |
|      | <b>₫</b> No                                     |   |   |
|      | Yes. Describe                                   |   |   |
| 10.  | Firearms  Examples: Pistols, rifles, s          | chotguns, ammunition, and related equipment   |   |
|      | ✓ No  ☐ Yes. Describe                           |   |   |

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Debtor Cooper, James Harold

Case number (if known)

| 11. Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories |   |                                |   |   |  |
|---|---|--------------------------------|---|---|--|
|   | ☐ No                                      |                                |   |   |  |
|   | Yes. Describe                             | Various used articles or less. | of clothing, shoes, and accessories, each valued at \$600   | \$250.00  |  |
| 12.   | Jewelry  Examples: Everyday jewell silver | ry, costume jewelry, engage    | ement rings, wedding rings, heirloom jewelry, watches, gems, gold,  |   |  |
|   | ☐ No                                      |                                |   |   |  |
|   | √ Yes. Describe                           | Various used pieces            | of jewelry.   | \$75.00   |  |
| 13.   | Non-farm animals                          |                                |   |   |  |
| Examples: Dogs, cats, birds, horses   |   |                                |   |   |  |
|   | ✓ No  ☐ Yes. Describe                     |                                |   |   |  |
| 14.   | Any other personal and he                 | ousehold items vou did n       | ot already list, including any health aids you did not list   |   |  |
|   | ✓ No                                      |                                | or all out you are need to  |   |  |
|   | Yes. Give specific information            |                                |   |   |  |
| 15.   |   | -                              | 3, including any entries for pages you have attached  | \$1,625.00  |  |
| Pa  | rt 4: Describe You                        | ur Financial Assets            |   |   |  |
| Do y  | ou own or have any legal o                | r equitable interest in any    | of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |  |
| 16.   | Cash                                      |                                |   |   |  |
|   | Examples: Money you have                  | e in your wallet, in your hor  | ne, in a safe deposit box, and on hand when you file your petition  |   |  |
|   | <b>√</b> No                               |                                |   |   |  |
|   | ☐ Yes                                     |                                | Cash:   |   |  |
| 17.   | Deposits of money                         |                                |   |   |  |
|   |   | •                              | unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each. |   |  |
|   | ☐ No                                      |                                |   |   |  |
|   | <b>√</b> Yes                              |                                | Institution name:   |   |  |
|   | 17.                                       | .1. Checking account:          | Key Bank  | \$981.61  |  |
|   | 17.                                       | .2. Savings account:           | Key Bank  | \$546.00  |  |
| 18.   | Bonds, mutual funds, or p                 | •                              | kerage firms, money market accounts   |   |  |
|   | <b>√</b> No                               |                                |   |   |  |
|   | ☐ Yes                                     |                                |   |   |  |

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Debtor Cooper, James Harold Case number (if known)

| 19. | Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture  |
|-----|---|
|     | ☑ No  |
|     | Yes. Give specific information about them   |
| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments  |
|     | Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. |
|     | ☑ No  |
|     | Yes. Give specific information about them   |
| 21. | Retirement or pension accounts  |
|     | Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |
|     | ☑ No  |
|     | Yes. List each account separately.  |
| 22. | Security deposits and prepayments   |
|     | Your share of all unused deposits you have made so that you may continue service or use from a company  |
|     | Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others   |
|     | ☑ No  |
|     | ☐ Yes   |
| 23. | Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)   |
|     | ☑ No  |
|     | ☐ Yes   |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.   |
|     | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).   |
|     | ☑ No  |
|     | ☐ Yes   |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit   |
|     | ☑ No  |
|     | Yes. Give specific information about them   |

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Debtor Cooper, James Harold Case number (if known)

| 26.  | Patents, copyrights, trademarks, trade secrets, and other intellectual property  |   |
|------|--|---|
|      | Examples: Internet domain names, websites, proceeds from royalties and licensing agreements  |   |
|      | ☑ No   |   |
|      | Yes. Give specific information about them  |   |
| 27.  | Licenses, franchises, and other general intangibles  |   |
|      | Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses   |   |
|      | ☑ No   |   |
|      | Yes. Give specific information about them  |   |
| Mone | y or property owed to you?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28.  | Tax refunds owed to you  |   |
|      | ☑ No   |   |
|      | Yes. Give specific information about them, including whether you already filed the returns and the tax years   |   |
| 29.  | Family support   |   |
|      | Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement   |   |
|      | ☑ No   |   |
|      | ☐ Yes. Give specific information   |   |
| 30.  | Other amounts someone owes you   |   |
|      | Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else |   |
|      | ☑ No   |   |
|      | ☐ Yes. Give specific information   |   |
| 31.  | Interests in insurance policies  |   |
|      | Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  |   |
|      | ☑ No   |   |
|      | Yes. Name the insurance company of each policy and list its value  |   |
| 32.  | Any interest in property that is due you from someone who has died   |   |
|      | If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.                        |   |
|      | ☑ No   |   |
|      | ☐ Yes. Give specific information   |   |
| 33.  | Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment   |   |
|      | Examples: Accidents, employment disputes, insurance claims, or rights to sue   |   |
|      | ☑ No   |   |
|      | Yes. Describe each claim   |   |

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| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims                               |  |  |  |  |  |
|-----|--|--|--|--|--|--|
|     | ☑ No   |  |  |  |  |  |
|     | Yes. Describe each claim   |  |  |  |  |  |
| 35. | Any financial assets you did not already list  |  |  |  |  |  |
|     | ☑ No   |  |  |  |  |  |
|     | Yes. Give specific information   |  |  |  |  |  |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here              |  |  |  |  |  |
| Pa  | Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.   |  |  |  |  |  |
| 37. | Do you own or have any legal or equitable interest in any business-related property?   |  |  |  |  |  |
|     | ☑ No. Go to Part 6.  |  |  |  |  |  |
|     | ☐ Yes. Go to line 38.  |  |  |  |  |  |
| 45. | Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here              |  |  |  |  |  |
| Pa  | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1. |  |  |  |  |  |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  |  |  |  |  |  |
|     | ✓ No. Go to Part 7.  |  |  |  |  |  |
|     | ☐ Yes. Go to line 47.  |  |  |  |  |  |
| 52. | Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here              |  |  |  |  |  |
| Pa  | rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above   |  |  |  |  |  |
| 53. | Do you have other property of any kind you did not already list?   |  |  |  |  |  |
|     | Examples: Season tickets, country club membership  |  |  |  |  |  |
|     | ☑ No   |  |  |  |  |  |
|     | Yes. Give specific information   |  |  |  |  |  |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number here  |  |  |  |  |  |
| Pa  | rt 8: List the Totals of Each Part of this Form  |  |  |  |  |  |
| 55. | Part 1: Total real estate, line 2 \$143,344.00   |  |  |  |  |  |
| 56. | Part 2: Total vehicles, line 5 \$0.00  |  |  |  |  |  |
| 57. | Part 3: Total personal and household items, line 15 \$1,625.00   |  |  |  |  |  |
| 58. | Part 4: Total financial assets, line 36 \$1,527.61   |  |  |  |  |  |

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| 59. | Part 5: Total business-related property, line 45             |    | \$0.00     |                              |    |              |
|-----|--|----|------------|------------------------------|----|--------------|
| 60. | Part 6: Total farm- and fishing-related property, line 52    | _  | \$0.00     |                              |    |              |
| 61. | Part 7: Total other property not listed, line 54             | +_ | \$0.00     |                              |    |              |
| 62. | Total personal property. Add lines 56 through 61             | -  | \$3,152.61 | Copy personal property total | +_ | \$3,152.61   |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 |    |            |                              |    | \$146,496.61 |

Official Form 106A/B Schedule A/B: Property page 7

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| Fill in this information to identify your case: |                          |             |                    |         |  |
|---|--------------------------|-------------|--------------------|---------|--|
| Debtor 1  | James                    | Harold      | Cooper             | _       |  |
|   | First Name               | Middle Name | Last Name          | _       |  |
| Debtor 2  |                          |             |                    |         |  |
| (Spouse, if filing)                             | First Name               | Middle Name | Last Name          |         |  |
| United States B                                 | Bankruptcy Court for the | Eastern     | District of Pennsy | Ivania_ |  |
| Case number                                     |                          |             |                    |         |  |
| (if known)                                      |                          |             |                    |         |  |

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| F  | Part 1: Identify the Property You Claim as Exempt   |   |  |   |   |                                    |
|----|---|---|--|---|---|------------------------------------|
| 1. | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  |   |  |   |   |                                    |
|    | •   | ion of the property and ule A/B that lists this | Current value of the portion you own  Copy the value from Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption. |   | Specific laws that allow exemption |
|    | Brief description:  | 24 Beech St<br>Pottstown, PA<br>19464-5402      | \$143,344.00   | <b>J</b>  | \$27,900.00   | 11 U.S.C. § 522(d)(1)              |
|    | Line from Schedule A/B:   | 1.1   |  |   | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. | 3. Are you claiming a homestead exemption of more than \$189,050?  (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)  ✓ No  ✓ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  ✓ No  ✓ Yes |   |  |   |   |                                    |

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Last Name

Case number (if known)

Debtor 1 Harold Cooper **James** Middle Name

First Name

Part 2: Additional Page Brief description of the property and Current value of the Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this portion you own Check only one box for each exemption. property Copy the value from Schedule A/B Brief Various used \$950.00 description: pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.  $\sqrt{\phantom{a}}$ \$950.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 6 Schedule A/B: any applicable statutory limit Brief Various used \$350.00 description: televisions, mobile devices, and computers, each valued at \$600 or less.  $\overline{\mathbf{A}}$ \$350.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 7 Schedule A/B: any applicable statutory limit Brief Various used \$250.00 description: articles of clothing, shoes, and accessories, each valued at \$600 or less.  $\sqrt{}$ \$250.00 11 U.S.C. § 522(d)(3) Line from 100% of fair market value, up to 11 Schedule A/B: any applicable statutory limit Brief Various used \$75.00 description: pieces of jewelry.  $\mathbf{\Lambda}$ \$75.00 11 U.S.C. § 522(d)(4) Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit Brief Key Bank \$981.61 description: **Checking account**  $\sqrt{\phantom{a}}$ \$981.61 11 U.S.C. § 522(d)(5) Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief **Key Bank** \$546.00 description: Savings account Q \$493.39 11 U.S.C. § 522(d)(5) Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit

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|  |  |   | Document   | Page 18 of 4            | 4                    |                          |                |  |  |
|--|--|---|--|-------------------------|----------------------|--------------------------|----------------|--|--|
| Fill in this inform  | ation to identify yo   | ur case:  |  |                         |                      |                          |                |  |  |
| Debtor 1   | James  | Harold  | Cooper   |                         |                      |                          |                |  |  |
|  | First Name   | Middle Name   | Last Name  |                         |                      |                          |                |  |  |
| Debtor 2   |  |   |  |                         |                      |                          |                |  |  |
| (Spouse, if filing)  | First Name   | Middle Name   | Last Name  |                         |                      |                          |                |  |  |
| United States E  | United States Bankruptcy Court for the: Eastern District of Pennsylvania   |   |  |                         |                      |                          |                |  |  |
| Case number (  |  |   | _  |                         |                      |                          |                |  |  |
| known)   |  |   |  | <del></del>             |                      |                          | this is an     |  |  |
|  |  |   |  |                         |                      | amende                   | a illing       |  |  |
| Official Forr  | <u>n 106D</u>  |   |  |                         |                      |                          |                |  |  |
| Schedu   | le D: Cre  | editors Wh  | o Have C   | laims Sec               | ured by              | Property                 | 12/15          |  |  |
| name and case in the case in t | e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If nore space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your ame and case number (if known).  Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below. |   |  |                         |                      |                          |                |  |  |
| 0 1:   | 1 -1-1 16  |   |  | at the constitue        | Column A             | Column B                 | Column C       |  |  |
|  |  | creditor has more than once than once than one creditor h |  |                         | Amount of claim      | Value of collateral      | Unsecured      |  |  |
| creditors in<br>creditor's na  |  | s possible, list the claim                                | the claims in alphabetical order according to the Do not dec |                         |                      | that supports this claim | portion If any |  |  |
| 2.1 Citadel I  | ECI I  | Doscrib   | the property that  | secures the claim:      | value of collateral. | \$442.244.00             | \$0.00         |  |  |
| Creditor's I   |  |   | the property that  | secures the claim.      | \$50,055.35<br>—     | \$143,344.00             | \$0.00         |  |  |
|  | nkruptcy   | 24 Bee  | ch St Pottstown,   | PA 19464-5402           |                      |                          |                |  |  |
|  | leview Blvd  | As of the   | e date vou file, the   | claim is: Check all tha | <b>─</b><br>t applv. |                          |                |  |  |
| Number   | Street   | □ Cont  | •  |                         |                      |                          |                |  |  |
| Exton, P   | A 19341  | ☐ Unlic   | •  |                         |                      |                          |                |  |  |
| City State ZIP Code Disputed   |  |   |  |                         |                      |                          |                |  |  |
| Who owes the debt? Check one. Nature of lien. Check all that apply.  |  |   |  |                         |                      |                          |                |  |  |
| ☑ Debtor 1 only ☑ An agreement you made (such as mortgage or secured car loan)   |  |   |  |                         |                      |                          |                |  |  |
| ☐ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)   |  |   |  |                         |                      |                          |                |  |  |
| ☐ Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit  |  |   |  |                         |                      |                          |                |  |  |
| At least one of the debtors and another Other (including a right to offset)  |  |   |  |                         |                      |                          |                |  |  |
|  | if this claim relat<br>unity debt  | es to a   |  |                         |                      |                          |                |  |  |
| Date debt  | was incurred   | Last 4 d  | igits of account nu  | mber <u>2 2 7</u>       | 9                    |                          |                |  |  |

\$50,055.35

Add the dollar value of your entries in Column A on this page. Write that number here:

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|                     |                        |                               | ocument               | Page 19 of 4             | .4                           |  |
|---------------------|------------------------|-------------------------------|-----------------------|--------------------------|------------------------------|--|
| Fill in this inform | nation to identify you | ur case:                      |                       |                          |                              |  |
| 5                   |                        |                               |                       |                          |                              |  |
| Debtor 1            | James                  | Harold                        | Cooper                |                          |                              |  |
|                     | First Name             | Middle Name                   | Last Name             |                          |                              |  |
| Debtor 2            |                        |                               |                       |                          |                              |  |
| (Spouse, if filing) | First Name             | Middle Name                   | Last Name             |                          |                              |  |
|                     |                        |                               | D: .                  |                          |                              |  |
| United States       | Bankruptcy Court fo    | r the: Easter                 | <b>n</b> Dist         | rict of Pennsylvar       | <u>nia</u>                   |  |
| Case number         |                        |                               |                       |                          |                              |  |
| (if known)          |                        |                               |                       | _                        |                              | Check if this is an  |
|                     |                        |                               |                       |                          |                              | amended filing   |
| Official For        | m 106F/F               |                               |                       |                          |                              |  |
|                     |                        |                               |                       |                          |                              |  |
| Schedu              | le E/F: C              | reditors Wh                   | no Have               | Unsecure                 | ed Claims                    | 12/15  |
|                     |                        |                               |                       |                          |                              |  |
| -                   | -                      |                               |                       |                          |                              | NONPRIORITY claims. List the<br>on Schedule A/B: Property (Officia |
|                     | •                      | •                             |                       |                          | -                            | y creditors with partially secured                                 |
| ,                   |                        | •                             | •                     | ,                        | ,                            | the Part you need, fill it out,                                    |
|                     |                        | n the left. Attach the Co     | ntinuation Page       | to this page. On the     | top of any additional pa     | ges, write your name and case                                      |
| number (if knov     | /n).                   |                               |                       |                          |                              |  |
| Part 1:             | List All of Vour       | PRIORITY Unsecured            | l Claims              |                          |                              |  |
| Part I:             | LIST AII OF YOUR F     | PRIORITY UNSECULED            | Claiilis              |                          |                              |  |
| 1. Do any cre       | editors have priori    | ty unsecured claims aga       | ainst you?            |                          |                              |  |
| ☑ No. Go            | to Part 2.             |                               |                       |                          |                              |  |
| Yes.                |                        |                               |                       |                          |                              |  |
|                     |                        |                               |                       |                          |                              |  |
| Part 2:             | List All of Your N     | NONPRIORITY Unsec             | cured Claims          |                          |                              |  |
| 3. Do any cre       | editors have nonn      | iority unsecured claims       | s against you?        |                          |                              |  |
|                     | •                      | •                             |                       |                          | a dula a                     |  |
| Yes                 | u nave nothing to re   | port in this part. Submit the | nis form to the co    | art with your other sch  | edules.                      |  |
| <b>Y</b> Yes        |                        |                               |                       |                          |                              |  |
| 4. List all of      | your nonpriority u     | nsecured claims in the        | alphabetical ord      | er of the creditor who   | o holds each claim. If a c   | creditor has more than one   |
| nonpriority         | unsecured claim, li    | st the creditor separately    | for each claim. Fo    | r each claim listed, ide | entify what type of claim it | t is. Do not list claims already                                   |
|                     |                        | •                             | ticular claim, list t | ne other creditors in Pa | art 3.If you have more tha   | in three nonpriority unsecured                                     |
| claims fill c       | out the Continuation   | Page of Part 2.               |                       |                          |                              |  |
|                     |                        |                               |                       |                          |                              | Total claim  |
| 4.1 Amorica         |                        | nal One dit Herian            | l a at 4 alia         | :tft                     | 0 0 0 0                      | <b>*227.00</b>   |
| Amence              |                        | ral Credit Union              | Last 4 dig            | its of account numb      | er <u>0 0 0 2</u>            | \$887.00   |
| Nonpriorit          | y Creditor's Name      |                               | When was              | the debt incurred?       | 3/1/2022                     |  |
| Attn: Ba            | nkruptcy               |                               |                       |                          | 0/1/2022                     | <del>-</del>   |
| 2060 Re             | d Lion Rd              |                               |                       |                          |                              |  |
| Number              | Street                 |                               | As of the             | date you file, the clai  | im is: Check all that apply  | <i>I</i> .   |
|                     |                        | 1000                          | Contin                | gent                     |                              |  |
|                     | lphia, PA 19115-       |                               | Unliqu                | dated                    |                              |  |
| City                | State                  | ZIP Co                        | ode 🔲 Disput          | ed                       |                              |  |
| Who incu            | rred the debt? Che     | eck one.                      | ·                     |                          |                              |  |
| <b>₫</b> Debto      | r 1 only               |                               | Type of N             | ONPRIORITY unsecu        | ıred claim:                  |  |
| Debto               | · ·                    |                               | Studer                | t loans                  |                              |  |
|                     | r 1 and Debtor 2 on    | h.                            | Obliga                | tions arising out of a s | eparation agreement or d     | ivorce that you did not report as                                  |
|                     |                        | •                             |                       | claims                   |                              |  |
| <del>-</del>        | st one of the debtor   |                               |                       | •                        | aring plans, and other sim   | nilar debts  |
| ☐ Checl             | c it this claim is foi | a community debt              | Other.                | Specify <b>Unknown</b>   |                              |  |
| Is the cla          | im subject to offse    | ıt?                           |                       |                          |                              | <del></del>  |
| ☑ No                | 200,231 10 01100       | = =                           |                       |                          |                              |  |
| UVI IVO             |                        |                               |                       |                          |                              |  |

☐ Yes

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Debtor 1

 James
 Harold
 Cooper
 Case number (if known)

 First Name
 Middle Name
 Last Name

| Pa    | rt 2: Your NONPRIORITY Unsecured Claims   | - Continuation Page   |
|-------|---|---|
| After | listing any entries on this page, number them beginn  | ing with 4.4, followed by 4.5, and so forth.  |
| 4.2   | Borough of Pottstown  | Last 4 digits of account number \$393.57  |
|       | Nonpriority Creditor's Name  100 E High St  | When was the debt incurred?   |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.  Contingent  |
|       | Pottstown, PA 19464-5438  | ☐ Unliquidated  ☐ Unliquidated  |
|       | City State ZIP Code   |   |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  ☐ Yes | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Utility Bill |
| 4.3   | Citadel FCU Nonpriority Creditor's Name Attn: Bankruptcy  | Last 4 digits of account number       0       0       9       4       \$6,971.00         When was the debt incurred?       10/1/2012  |
|       | 520 Eagleview Blvd  Number Street  Exton, PA 19341  City State ZIP Code   | As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  |
|       | Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes                     | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard   |

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Debtor 1

 James
 Harold
 Cooper
 Case number (if known) \_

 First Name
 Middle Name
 Last Name

| Pa    | rt 2: Your NONPRIORITY Unsecured Claims -  | - Continuation Page   |
|-------|--|---|
| After | listing any entries on this page, number them beginning  | ng with 4.4, followed by 4.5, and so forth.   |
| 4.4   | Citadel FCU  | Last 4 digits of account number 0 0 0 3 \$6,615.00  |
|       | Nonpriority Creditor's Name Attn: Bankruptcy   | When was the debt incurred? 4/1/2017  |
|       | Number Street  Exton, PA 19341  City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  Yes | <ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>□ Contingent</li> <li>□ Unliquidated</li> <li>□ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>□ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>✓ Other. Specify Unsecured</li> </ul> |
| 4.5   | First National Bank of Pennsylvania  Nonpriority Creditor's Name  Attn: Legal Dept  3015 Glimcher Blvd  Number Street  Hermitage, PA 16148  City State ZIP Code  Who incurred the debt? Check one.   | Last 4 digits of account number 0 9 1 7 \$9,202.00  When was the debt incurred? 9/1/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans  |
|       | <ul> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> <li>□ Check if this claim is for a community debt</li> <li>Is the claim subject to offset?</li> <li>☑ No</li> <li>□ Yes</li> </ul>                            | <ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify Unknown</li> </ul>   |

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Debtor 1

 James
 Harold
 Cooper
 Case number (if known)

 First Name
 Middle Name
 Last Name

| Pa    | rt 2: Your NONPRIORITY Unsecured Claims —   | - Continuation Page   |            |
|-------|---|---|------------|
| After | listing any entries on this page, number them beginning   | g with 4.4, followed by 4.5, and so forth.  | otal claim |
| 4.6   | Fst Premier   | Last 4 digits of account number 1 5 7 9   | \$479.00   |
|       | Nonpriority Creditor's Name  3820 N Louise Ave  Number Street   | When was the debt incurred? 4/28/2022   |            |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.  |            |
|       | Sioux Falls, SD 57107   | ☐ Contingent  |            |
|       | City State ZIP Code   | - ☐ Unliquidated ☐ Disputed   |            |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not repriority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard | eport as   |
|       | Is the claim subject to offset? ☑ No ☑ Yes  |   |            |
| 4.7   | Grow Credit Inc.  | Last 4 digits of account number 0 A 3 S   | \$74.00    |
|       | Nonpriority Creditor's Name  Attn: Bankruptcy   | When was the debt incurred? 2/1/2022  |            |
|       | 1447 2nd Street   | -   |            |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.  |            |
|       | Santa Monica, CA 90401  City State ZIP Code   | <ul><li>☐ Contingent</li><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>  |            |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not repriority claims   | report as  |
|       | ☐ At least one of the debtors and another☐ Check if this claim is for a community debt  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CheckCreditOrLineOfCredit  |            |
|       | Is the claim subject to offset? ☑ No □ Yes  |   |            |

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Debtor 1

 James
 Harold
 Cooper
 Case number (if known) \_

 First Name
 Middle Name
 Last Name

| -6    | Your NONPRIORITY Unsecured Claims —   | Continuation Page  |
|-------|---|--|
| After | listing any entries on this page, number them beginning   | g with 4.4, followed by 4.5, and so forth. Total claim   |
| 4.8   | Kohl's  | Last 4 digits of account number 4 2 8 2 \$403.00   |
|       | Nonpriority Creditor's Name   | · ———  |
|       | Attn: Credit Administrator  | When was the debt incurred? 12/1/2011  |
|       | PO Box 3043   | •  |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.   |
|       | Milwaukee, WI 53201-3043  | ☐ Contingent   |
|       | City State ZIP Code   | · ☐ Unliquidated ☐ Disputed  |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  Yes | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ChargeAccount     |
| 4.9   | Portfolio Recovery Associates, LLC Nonpriority Creditor's Name Attn: Bankruptcy   | Last 4 digits of account number       0       9       8       4       \$564.00         When was the debt incurred?       12/1/2020   |
|       | 150 Corporate Blvd  |  |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.   |
|       | Norfolk, VA 23502-4952  | Contingent   |
|       | City State ZIP Code   | <ul> <li>Unliquidated</li> <li>Disputed</li> </ul>   |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  Yes | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ UnknownLoanType |

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Debtor 1

 James
 Harold
 Cooper
 Case number (if known)

 First Name
 Middle Name
 Last Name

| Pa    | rt 2: Your NONPRIORITY Unsecured Claims —   | Continuation Page  |         |        |        |              |                       |
|-------|---|--|---------|--------|--------|--------------|-----------------------|
| After | listing any entries on this page, number them beginning   | g with 4.4, followed by 4.5, and so for  | rth.    |        |        |              | Total claim           |
| 4.10  | Raymour & Flanigan  | Last 4 digits of account number  | 2       | 2      | 8      | 4            | \$7,279.00            |
|       | Nonpriority Creditor's Name   |  |         |        |        | _            |                       |
|       | Attn: Bankruptcy  | When was the debt incurred?  |         | 12/1/  | 2016   | <u> </u>     |                       |
|       | PO Box 220  |  |         |        |        |              |                       |
|       | Number Street   | As of the date you file, the claim is  | : Che   | ck all | that a | apply.       |                       |
|       | Liverpool, NY 13088   | Contingent   |         |        |        |              |                       |
|       | City State ZIP Code   | <ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>  |         |        |        |              |                       |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  □ Yes | Type of NONPRIORITY unsecured of Student loans  ☐ Obligations arising out of a separapriority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify ChargeAccount   | ation a | agree  |        |              | you did not report as |
| 4.11  | Target NB   | Last 4 digits of account number  | 7       | 5      | 3      | 9            | \$2,129.00            |
|       | Nonpriority Creditor's Name   | When was the debt incurred?  |         | 11/1/  | 2012   | 2            |                       |
|       | C/O Financial & Retail Services   |  |         | , .,   |        | <del>-</del> |                       |
|       | Mailstop BT PO Box 9475   | As of the data you file the claim is   | Cha     | المباء | 414    |              |                       |
|       | Number Street   | As of the date you file, the claim is  | : Che   | ck all | ınaı   | арріу.       |                       |
|       | Minneapolis, MN 55440   | <ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>  |         |        |        |              |                       |
|       | City State ZIP Code   | ☐ Disputed   |         |        |        |              |                       |
|       | Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?              | Type of NONPRIORITY unsecured of Student loans  ☐ Obligations arising out of a separation priority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify CreditCard | ation a | agree  |        |              | you did not report as |
|       | ☑ No  |  |         |        |        |              |                       |
|       | ☐ Yes   |  |         |        |        |              |                       |

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Debtor 1 Ja<u>mes</u> Harold Cooper \_ Case number (if known) \_ First Name Middle Name Last Name

| Par         | t 2: Your NOI   | NPRIORITY Unse                   | cured Claims —  | Continuation Page   |       |           |           |               |             |
|-------------|---|----------------------------------|---|---|-------|-----------|-----------|---------------|-------------|
| After I     | isting any entries  | on this page, numbe              | er them beginning   | g with 4.4, followed by 4.5, and so for                     | rth.  |           |           |               | Total claim |
| 1           | Wells Fargo Ban<br>Nonpriority Creditor's<br>Attn: Bankruptcy   | Name                             |   | Last 4 digits of account number When was the debt incurred? | 8     | 9<br>6/1/ | 7<br>/201 | <u>1</u><br>8 | \$2,878.00  |
| 1           | •   | MAC X2303-01A<br>Street<br>50328 | 3rd Floor   | As of the date you file, the claim is  Contingent           | : Che | ck al     | I tha     | t apply.      |             |
|             | City  | State                            | ZIP Code  | <ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>         |       |           |           |               |             |
| [<br>[<br>[ | Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt |                                  | Type of NONPRIORITY unsecured  ☐ Student loans ☐ Obligations arising out of a separ priority claims ☐ Debts to pension or profit-sharing ☑ Other. Specify ChargeAccount | ation a   | agree |           |           |               |             |
| 5           | s the claim subject<br>☑ No<br>☐ Yes  | t to offset?                     |   |   |       |           |           |               | _           |

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Case number (if known) \_

Debtor 1

 James
 Harold
 Cooper

 First Name
 Middle Name
 Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims** 6a. **Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$0.00 Claims for death or personal injury while you were 6c. 6c. \$0.00 intoxicated Other. Add all other priority unsecured claims. 6d. 6d. \$0.00 Write that amount here. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim Total claims** 6f. Student loans 6f. \$0.00 from Part 2 6g. Obligations arising out of a separation agreement or 6g. \$0.00 divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other 6h. 6h. \$0.00 similar debts 6i. Other. Add all other nonpriority unsecured claims. 6i. \$37,874.57 Write that amount here. 6j. Total. Add lines 6f through 6i. 6j. \$37,874.57

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| Fill in this information | n to identify your case | :           |                   |            |
|--------------------------|-------------------------|-------------|-------------------|------------|
| Debtor 1                 | James                   | Harold      | Cooper            |            |
|                          | First Name              | Middle Name | Last Name         |            |
| Debtor 2                 |                         |             |                   |            |
| (Spouse, if filing)      | First Name              | Middle Name | Last Name         |            |
| United States Bank       | ruptcy Court for the:   | Easte       | rn District of Pe | nnsylvania |
| Case number (if known)   |                         |             |                   |            |

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with who | om you ha | ve the contract or lease | State what the contract or lease is for |
|-----|-----------|------------------|-----------|--------------------------|---|
| 2.1 |           |                  |           |                          |   |
|     | Name      |                  |           |                          |   |
|     | Number    | Street           |           |                          | •                                       |
|     | City      |                  | State     | ZIP Code                 | •                                       |
| 2.2 |           |                  |           |                          |   |
|     | Name      |                  |           |                          |   |
|     | Number    | Street           |           |                          | •                                       |
|     | City      |                  | State     | ZIP Code                 | •                                       |
| 2.3 |           |                  |           |                          |   |
|     | Name      |                  |           |                          |   |
|     | Number    | Street           |           |                          | •                                       |
|     | City      |                  | State     | ZIP Code                 | •                                       |
| 2.4 |           |                  |           |                          |   |
|     | Name      |                  |           |                          |   |
|     | Number    | Street           |           |                          |   |
|     | City      |                  | State     | ZIP Code                 | •                                       |

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|                  |                 |                         |                              | <u>Document Pad</u>  | e 28 of 44               |   |
|------------------|-----------------|-------------------------|------------------------------|--|--------------------------|---|
| Fill in          | this inform     | nation to identify yo   | ur case:                     |  |                          |   |
| Debt             | tor 1           | James                   | Harold                       | Cooper   |                          |   |
|                  |                 | First Name              | Middle Name                  | Last Name  |                          |   |
| Debt             |                 |                         |                              |  |                          |   |
| (Spo             | use, if filing) | First Name              | Middle Name                  | Last Name  |                          |   |
| Unite            | ed States E     | Bankruptcy Court fo     | or the: Easte                | prn District of  | Pennsylvania             |   |
| Case             | e number        |                         |                              |  |                          |   |
| (if kn           | own)            |                         |                              |  |                          | ☐ Check if this is an amended filing  |
| Offic            | ial Forr        | n 106H                  |                              |  |                          | _   |
|                  |                 |                         |                              |  |                          |   |
| SCI              | neau            | ie H: You               | ur Codebto                   | rs   |                          | 12/15   |
| iling t<br>he en | ogether, b      | oth are equally re      | esponsible for supplyir      | ng correct information. If r                               | nore space is needed, c  | eurate as possible. If two married people are opy the Additional Page, fill it out, and number Pages, write your name and case number (if                       |
| 1.               | Do you h        | ave any codebtor        | s? (If you are filing a joir | nt case, do not list either spo                            | ouse as a codebtor.)     |   |
|                  | <b>√</b> No     |                         |                              |  |                          |   |
|                  | ☐ Yes           |                         |                              |  |                          |   |
| 2.               |                 |                         |                              | unity property state or ter<br>Puerto Rico, Texas, Washing |                          | perty states and territories include Arizona,   |
|                  |                 | o to line 3.            |                              |  |                          |   |
|                  |                 |                         | rmer spouse, or legal eq     | quivalent live with you at the                             | time?                    |   |
|                  | ☐ No            |                         | unity state or territory did | Lyou live?   | Fill in the              | name and current address of that person.  |
|                  |                 | 33. III WIIICH COIIIIII | army state of territory did  | you live:  | . 1 111 111 111          | name and current address of that person.  |
|                  | N               | ame of your spous       | e, former spouse, or leg     | al equivalent  |                          |   |
|                  | N               | umber                   | Street                       |  |                          |   |
|                  |                 |                         |                              |  |                          |   |
|                  | С               | ity                     | State                        | ZIP Code   |                          |   |
| 3.               | 2 again a       | s a codebtor only       | if that person is a gua      | rantor or cosigner. Make                                   | sure you have listed the | s filing with you. List the person shown in line creditor on <i>Schedule D</i> (Official Form 106D), <i>le E/F</i> , or <i>Schedule G</i> to fill out Column 2. |
|                  | Column 1        | : Your codebtor         |                              |  | Column 2: T              | he creditor to whom you owe the debt  |
|                  |                 |                         |                              |  | Check all so             | hedules that apply:   |
| 3.1              |                 |                         |                              |  |                          |   |
|                  | Name            |                         |                              |  | ☐ Schedul                | e D, line   |
|                  |                 |                         | O: .                         |  | Schedul                  | e E/F, line   |
|                  | Number          |                         | Street                       |  | ☐ Schedul                | e G, line   |
|                  | City            |                         | State                        |  | ZIP Code                 |   |
| 3.2              |                 |                         |                              |  |                          |   |
|                  | Name            |                         |                              |  | ☐ Schedul                | e D, line   |
|                  |                 |                         |                              |  | Schedul                  | e E/F, line   |
|                  | Number          |                         | Street                       |  | ☐ Schedul                | e G, line   |

ZIP Code

State

City

|                     | Case 24-119  | 94 Doc 1 Filed 0<br>Docu                     |                            | tered 06<br>29 of 4 | 6/11/24 12:35:<br>14 | 25 Desc Ma  | ain   |    |
|---------------------|--|--|----------------------------|---------------------|----------------------|---|---|----|
| Fill                | in this information to identify your   | case:  |                            |                     |                      |   |   |    |
| De                  | ebtor 1 James First Name   |  | oper<br>Name               |                     |                      |   |   |    |
| (S)<br>Ur<br>Ca     | pouse, if filing) First Name  nited States Bankruptcy Court for ase number known)  |  | Name<br>trict of Pennsylva | nia                 |                      | eck if this is:  An amended filing  A supplement show chapter 13 income a | ing postpetition<br>as of the following dat | e: |
|                     | ficial Form 106I<br>chedule I: Your II   | ncome  |                            |                     |                      |   | 12/15                                       |    |
| spou<br>addi<br>Pau | rmation. If you are married and nouse is not filing with you, do not itional pages, write your name and the control of the con | nclude information about you                 | r spouse. If more s        | pace is nee         |                      |   | m. On the top of any                        |    |
|                     | If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  | Employment status Occupation Employer's name | □ Employed <b>☑</b> N      | ot Employe          | ed                   | Employed Not E  | Employed                                    | -  |
|                     | Occupation may include student or homemaker, if it applies.  | Employer's address                           | Number Street              |                     | N                    | umber Street  |   | -  |
|                     |  |  | City                       | State               | 7: 0 1               |   |   | -  |
|                     | rt 2: Give Details About Mo  | How long employed there?                     | ,                          | State<br>—          | Zip Code C           | ity   | State Zip Code                              |    |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 1

So.00

\$0.00

\$0.00

Case 24-11994 Doc 1 Filed 06/11/24 Entered 06/11/24 12:35:25 Desc Main Page 30 of 44 Document Debtor 1 Harold Cooper **James** Case number (if known) -First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$0.00 \$0.00 Copy line 4 here.....→ 4. List all payroll deductions: \$0.00 \$0.00 5a. 5a. Tax, Medicare, and Social Security deductions \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans \$0.00 \$0.00 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. \$0.00 \$0.00 \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: \$0.00 5h. \$0.00 \$0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$1,733.33 \$0.00 monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 8c. settlement, and property settlement. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$1,996.00 \$0.00 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$0.00 \$0.00 8f. Specify: \_ \$0.00 \$0.00 8g. Pension or retirement income 8g. \$80.16 \$0.00 8h. Other monthly income. Specify: Pro-Rata 2023 Federal 8h. **Income Tax Return** 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$3,809.49 \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. \$3,809.49 \$0.00 \$3,809.49 11 12

|     | 10.   |       | 40,000110               |
|-----|---|-------|-------------------------|
| 11. | State all other regular contributions to the expenses that you list in Schedule J.  |       |                         |
|     | Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule</i> | J.    |                         |
|     | Specify:  | 11. + | \$0.00                  |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  | 12.   | \$3,809.49              |
|     |   |       | Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after you file this form?   |       |                         |
|     | ☑ No.   |       |                         |
|     | ☐ Yes. Explain:   |       |                         |
|     |   |       |                         |

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Debtor 1 **James** Harold Cooper Case number (if known) -First Name Middle Name Last Name 8a. Attached Statement **Rental Income** 1. Gross Monthly Income: \$1,733.33 TOTAL EXPENSES \$0.00 3. AVERAGE NET MONTHLY INCOME \$1,733.33

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| Fill in this informatio         | n to identify your case | :                     |                             |   |
|---------------------------------|-------------------------|-----------------------|-----------------------------|---|
| Debtor 1                        | James<br>First Name     | Harold<br>Middle Name | Cooper<br>Last Name         | Check if this is:   |
| Debtor 2<br>(Spouse, if filing) | First Name              | Middle Name           | Last Name                   | <ul> <li>An amended filing</li> <li>A supplement showing postpetition chapter expenses as of the following date:</li> </ul> |
|                                 | cruptcy Court for the:  | Easte                 | rn District of Pennsylvania | MM / DD / YYYY  |
| Case number<br>(if known)       |                         |                       |                             |   |

### Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Your Household  | d  |   |                 |                               |
|----|--|--|---|-----------------|-------------------------------|
| 1. | Is this a joint case?  |  |   |                 |                               |
|    | No. Go to line 2.  Yes. Does Debtor 2 live in a sep  No  Yes. Debtor 2 must file     | arate household?  Official Form 106J-2, Expenses for | Separate Household of Debtor 2.   |                 |                               |
| 2. | Do you have dependents?  | ✓No  |   |                 |                               |
|    | Do not list Debtor 1 and Debtor 2.   | Yes. Fill out this information for each dependent    | Dependent's relationship to<br>Debtor 1 or Debtor 2                         | Dependent's age | Does dependent live with you? |
|    | Do not state the dependents' names.  |  |   |                 | No. Yes.                      |
|    |  |  |   |                 | No. Yes.                      |
|    |  |  |   |                 | . No. Yes.                    |
|    |  |  |   |                 | . No. Yes.                    |
|    |  |  |   |                 | No. Yes.                      |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | <b>☑</b> No<br>□ <sub>Yes</sub>                      |   |                 |                               |
| Pa | art 2: Estimate Your Ongoing N   | Monthly Expenses                                     |   |                 |                               |
|    |  |  | using this form as a supplement in a leck the box at the top of the form an |                 |                               |
|    | clude expenses paid for with non-carch   |  |   | You             | ur expenses                   |
| 4. | The rental or home ownership experts for the ground or lot.                          | enses for your residence. Include t                  | first mortgage payments and any rent  | 4               | \$620.00                      |
|    | If not included in line 4:   |  |   |                 |                               |
|    | 4a. Real estate taxes  |  |   | 4a              | \$0.00                        |
|    | 4b. Property, homeowner's, or rent   | er's insurance                                       |   | 4b              | \$50.00                       |
|    | 4c. Home maintenance, repair, and  | d upkeep expenses                                    |   | 4c              | \$50.00                       |
|    | 4d. Homeowner's association or co  | ondominium dues                                      |   | 4d              | \$0.00                        |

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Debtor 1 James Harold Cooper Case number (if known)

Last Name

First Name

Middle Name

|   | Yo                                    | ur expenses |
|---|---------------------------------------|-------------|
| . Additional mortgage payments for your residence, such as home equity loans  | 5                                     | \$0.00      |
| . Utilities:  |                                       |             |
| 6a. Electricity, heat, natural gas  | 6a                                    | \$150.00    |
| 6b. Water, sewer, garbage collection  | 6b.                                   | \$100.00    |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c                                    | \$200.00    |
| 6d. Other. Specify:   | 6d.                                   | \$0.00      |
| Food and housekeeping supplies  | 7.                                    | \$654.00    |
| Childcare and children's education costs  | 8                                     | \$0.00      |
| . Clothing, laundry, and dry cleaning   | 9.                                    | \$200.00    |
| Personal care products and services   | 10.                                   | \$100.00    |
| Medical and dental expenses   | 11                                    | \$200.00    |
| 2. Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.   | 12.                                   | \$100.00    |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.                                   | \$100.00    |
| 4. Charitable contributions and religious donations   | 14.                                   | \$0.00      |
| 5. Insurance.   | · · · · · · · · · · · · · · · · · · · |             |
| Do not include insurance deducted from your pay or included in lines 4 or 20.   |                                       |             |
| 15a. Life insurance   | 15a                                   | \$0.00      |
| 15b. Health insurance   | 15b                                   | \$0.00      |
| 15c. Vehicle insurance  | 15c                                   | \$0.00      |
| 15d. Other insurance. Specify:  | 15d                                   | \$0.00      |
| 5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   |                                       |             |
| Specify:  | 16                                    | \$0.00      |
| 7. Installment or lease payments:   |                                       |             |
| 17a. Car payments for Vehicle 1   | 17a                                   | \$0.00      |
| 17b. Car payments for Vehicle 2   | 17b                                   | \$0.00      |
| 17c. Other. Specify:  | 17c                                   | \$0.00      |
| 17d. Other. Specify:  | 17d                                   | \$0.00      |
| 3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. <u> </u>                          | \$0.00      |
| Other payments you make to support others who do not live with you.   |                                       |             |
| Specify:  | 19.                                   | \$0.00      |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom   | <br>e.                                |             |
| 20a. Mortgages on other property  | 20a                                   | \$0.00      |
| 20b. Real estate taxes  |                                       | \$0.00      |
| 20c. Property, homeowner's, or renter's insurance   |                                       | \$0.00      |
| 20d. Maintenance, repair, and upkeep expenses   | 20d.                                  | \$0.00      |
| 20e. Homeowner's association or condominium dues  | 20e.                                  | \$0.00      |

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Debtor 1 **James** Harold Cooper Case number (if known) -First Name Middle Name Last Name 21. Other. Specify: 21. + \_\_\_\_\_ \$0.00 22. Calculate your monthly expenses. 22a. \$2,524.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$2,524.00 23. Calculate your monthly net income. 23a. \$3,809.49 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$2,524.00 23c. Subtract your monthly expenses from your monthly income. \$1,285.49 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. None Yes.

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| Fill in this information to identify your case: |                       |             |                              |  |  |  |
|---|-----------------------|-------------|------------------------------|--|--|--|
| Debtor 1  | James                 | Harold      | Cooper                       |  |  |  |
|   | First Name            | Middle Name | Last Name                    |  |  |  |
| Debtor 2  |                       |             |                              |  |  |  |
| (Spouse, if filing)                             | First Name            | Middle Name | Last Name                    |  |  |  |
| United States Bank                              | ruptcy Court for the: | Easte       | ern District of Pennsylvania |  |  |  |
| Case number (if known)                          |                       |             |                              |  |  |  |

☐ Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

| of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page. |                                   |
|---|-----------------------------------|
| Part 1: Summarize Your Assets   |                                   |
|   | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B)  |                                   |
| 1a. Copy line 55, Total real estate, from Schedule A/B  | \$143,344.00                      |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | \$3,152.61                        |
| 1c. Copy line 63, Total of all property on Schedule A/B   | <u>\$146,496.61</u>               |
| Part 2: Summarize Your Liabilities  |                                   |
|   | Your liabilities Amount you owe   |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)   |                                   |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  | <u>\$50,055.35</u>                |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                       | \$0.00                            |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | +\$37,874.57                      |
| Your total liabilities  | \$87,929.92                       |
| Part 3: Summarize Your Income and Expenses  |                                   |
| 4. Schedule I: Your Income (Official Form 106I)   |                                   |
| Copy your combined monthly income from line 12 of Schedule I  | \$3,809.49                        |
| 5. Schedule J: Your Expenses (Official Form 106J)   |                                   |
| Copy your monthly expenses from line 22c of Schedule J  | \$2,524.00                        |

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Debtor 1 James Harold Cooper Case number (if known)

Last Name

| Pa | Answer These Questions for Administrative and Statistical Records  |                                |          |
|----|--|--------------------------------|----------|
|    | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the Yes   | ne court with your other sched | ules.    |
|    | What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individua family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28  Your debts are not primarily consumer debts. You have nothing to report on this part of the for this form to the court with your other schedules. | U.S.C. § 159.                  |          |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.  | n Official                     | \$439.88 |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:   | Total claim                    |          |
|    | From Part 4 on Schedule E/F, copy the following:   |                                |          |
|    | 9a. Domestic support obligations (Copy line 6a.)   | \$0.00                         |          |
|    | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$0.00                         |          |
|    | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$0.00                         |          |
|    | 9d. Student loans. (Copy line 6f.)   | \$0.00                         |          |
|    | 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)  | \$0.00                         |          |
|    | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | + \$0.00                       |          |
|    | 9g. <b>Total</b> . Add lines 9a through 9f.  | \$0.00                         |          |
|    |  |                                |          |

First Name

Middle Name

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| Fill in this information to identify your case: |                      |             |                    |           |  |
|---|----------------------|-------------|--------------------|-----------|--|
| Debtor 1  | James                | Harold      | Cooper             |           |  |
|   | First Name           | Middle Name | Last Name          | _         |  |
| Debtor 2  |                      |             |                    |           |  |
| (Spouse, if filing)                             | First Name           | Middle Name | Last Name          | _         |  |
| United States Bankr                             | uptcy Court for the: | Easte       | rn District of Pen | nsylvania |  |
| Case number<br>(if known)                       |                      |             |                    |           |  |

### Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT an attor      | ney to help you fill out bankruptcy forms?  |
| ☑No  |   |
| Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |
| Under penalty of perjury, I declare that I have read the sum | mary and schedules filed with this declaration and that they are true and correct.            |
|  |   |
| /s/ Lacey Cooper   |   |
| Proposed Next Friend of Debtor 1                             |   |
| Date 06/10/2024 MM/ DD/ YYYY                                 |   |
|  |   |

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| Fill in this information to identify your case: |            |             |                             |          |  |
|---|------------|-------------|-----------------------------|----------|--|
| Debtor 1  | _James     | Harold      | Cooper                      |          |  |
|   | First Name | Middle Name | Last Name                   |          |  |
| Debtor 2  |            |             |                             |          |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name                   |          |  |
| United States Bankruptcy Court for the:         |            | Easte       | rn District of Pennsylvania | <u>1</u> |  |
| Case number                                     |            |             |                             |          |  |
| (if known)                                      |            |             |                             |          |  |

## Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Give Details About Your Marit  | ai Status and Where Yo              | ou Livea Before                    |                                     |                                    |
|--|-------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| 1. What is your current marital status?  |                                     |                                    |                                     |                                    |
| ☐ Married  |                                     |                                    |                                     |                                    |
| ✓ Not married  |                                     |                                    |                                     |                                    |
| 2. During the last 3 years, have you lived an  | ywhere other than where y           | ou live now?                       |                                     |                                    |
| <b>☑</b> No  |                                     |                                    |                                     |                                    |
| Yes. List all of the places you lived in th  | e last 3 years. Do not includ       | le where you live now.             |                                     |                                    |
|  |                                     |                                    |                                     |                                    |
| 3. Within the last 8 years, did you ever live veritories include Arizona, California, Idaho, l   |                                     |                                    |                                     |                                    |
| ✓ No   | Louisiana, Novada, Now Me           | Albe, Fuerte Fried, Texas, V       | vasimigion, and vvisconsin.         | <i>)</i>                           |
| _  | V 0 111 (0ff):15                    | 40011)                             |                                     |                                    |
| Yes. Make sure you fill out Schedule H.  | Your Codeptors (Official Fo         | orm 106H).                         |                                     |                                    |
|  |                                     |                                    |                                     |                                    |
| Part 2: Explain the Sources of Your I  | ncome                               |                                    |                                     |                                    |
| 4. Did you have any income from employme Fill in the total amount of income you receive If you are filing a joint case and you have income the property of the | d from all jobs and all busine      | esses, including part-time a       | ctivities.                          | rears?                             |
| ☐ No   |                                     |                                    |                                     |                                    |
| Yes. Fill in the details.  |                                     |                                    |                                     |                                    |
|  | Debtor 1                            |                                    | Debtor 2                            |                                    |
|  | Sources of income                   | Gross Income                       | Sources of income                   | Gross Income                       |
|  | Check all that apply.               | (before deductions and exclusions) | Check all that apply.               | (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy:  | ☐ Wages, commissions, bonuses, tips |                                    | ☐ Wages, commissions, bonuses, tips |                                    |
| . ,  | ✓ Operating a business              | \$2,158.33                         | Operating a business                |                                    |
|  |                                     |                                    |                                     |                                    |

| ebtor 1   |  |   | Doc 1 Filed 06/1<br>Docume   |   | 11/24 12:35:25<br>   | Desc Mail  |
|---|--|---|--|---|--|--|
|   | James  | Harold  | Cooper   |   | Case number (if ki   | nown)  |
|   | First Name   | Middle Na   | ame Last Name  |   |  |  |
|   | to December 31, 2  | 2023 \  | ☐ Wages, commissions bonuses, tips   | ,   | ☐ Wages, commission bonuses, tips  | is,  |
| (January 1  | to December 31, 2  | YYYY )  | Operating a business   |   | Operating a business   | S  |
|   |  |   |  |   |  |  |
|   | lendar year before to December 31, 2   |   | Wages, commissions bonuses, tips   | \$33,870.00   | ☐ Wages, commission bonuses, tips  | os,  |
| (0000.)   | 10 2 000201 0 1, <u>-</u>  | YYYY  | Operating a business   |   | Operating a business   | S  |
| Include incon public benefit filing a joint c                                   | me regardless of wh<br>t payments; pensior<br>case and you have i  | nether that inc<br>ns; rental inc   | ome; interest; dividends; n  | s of other income are alimony   |  | ecurity, unemployment, and other<br>and lottery winnings. If you are |
| <b>⊻</b> Yes. Fil   | ll in the details.   |   | Debtor 1   |   | Debtor 2   |  |
|   |  |   | Sources of income  | Gross income from   | Sources of income  | Gross Income from  |
|   |  |   | Describe below.  | each source   | Describe below.  | each source  |
|   |  |   |  | (before deductions and exclusions)  |  | (before deductions and exclusions)                                   |
|   | uary 1 of current ye<br>iled for bankruptcy  |   | Social Security  | \$9,980.00  |  |  |
| For last ca   | ılendar year:  |   | Unemployment   | \$9,646.00  |  |  |
|   |  |   | Compensation Social Security   | \$23,208<br>(estimated)   |  |  |
| (January 1  | to December 31, 2  | YYYY  |  |   |  |  |
| For the cal<br>(January 1   | lendar year before to December 31, 2   | that:<br>2022<br>YYYY   | ade Before You Filed   | for Bankruptcy  |  |  |
| For the cal<br>(January 1   | lendar year before to December 31, 2   | that:<br>2022<br>YYYY<br>ents You M   |  |   |  |  |
| For the cal (January 1  art 3: List  6. Are either                              | to December 31, 2  t Certain Payme  Debtor 1's or Debtor  Neither Debtor 1 no  | that: 2022  YYYY  ents You M  or 2's debts p  or Debtor 2 h  ily for a person                                       | ade Before You Filed  orimarily consumer debts?  as primarily consumer de  onal, family, or household p  | ebts. Consumer debts are de<br>purpose."  |  | 3) as "incurred by   |
| For the cal (January 1  art 3: List   | to December 31, 2  t Certain Payme  Debtor 1's or Debtor  Neither Debtor 1 no  | that:  2022  YYYY  ents You M  or 2's debts p  or Debtor 2 h  ily for a perso before you fil                        | ade Before You Filed  orimarily consumer debts?  as primarily consumer de  onal, family, or household p  | ?<br>ebts. Consumer debts are de  |  | 3) as "incurred by   |
| For the cal (January 1  Part 3: List  6. Are either                             | t Certain Payme  Debtor 1's or Debtor  Neither Debtor 1 no an individual primari During the 90 days I  No. Go to line 7.  Yes. List below paid that of | ents You M  or 2's debts p  or Debtor 2 h  ily for a perso before you fil   | ade Before You Filed  orimarily consumer debts?  as primarily consumer de  onal, family, or household pled for bankruptcy, did you  or to whom you paid a total  not include payments for de                                 | Pebts. Consumer debts are deburpose."  pay any creditor a total of \$7  I of \$7,575* or more in one of omestic support obligations,            | 7,575* or more?  | total amount you   |
| For the cal (January 1  Part 3: List  6. Are either  No. No. No. In Calculation | t Certain Payme  To Debtor 1's or Debtor  Neither Debtor 1 note in individual primariouring the 90 days in the second paid that a not include          | ents You M or 2's debts p or Debtor 2 h illy for a perso before you fil or each creditor creditor. Do r le payments | ade Before You Filed  primarily consumer debts?  as primarily consumer de  ponal, family, or household pled for bankruptcy, did you  por to whom you paid a total  not include payments for de  to an attorney for this bank | Pebts. Consumer debts are deburpose."  pay any creditor a total of \$7  I of \$7,575* or more in one of omestic support obligations,            | 7,575* or more?<br>or more payments and the<br>such as child support and | total amount you   |
| For the cal (January 1  Part 3: List  6. Are either                             | t Certain Payme  To Debtor 1's or Debtor  Neither Debtor 1 note in individual primariouring the 90 days in the second paid that a not include          | ents You M or 2's debts p or Debtor 2 h illy for a perso before you fil or each creditor creditor. Do r le payments | ade Before You Filed  primarily consumer debts?  as primarily consumer de  ponal, family, or household pled for bankruptcy, did you  por to whom you paid a total  not include payments for de  to an attorney for this bank | ebts. Consumer debts are deburpose."  pay any creditor a total of \$7  of \$7,575* or more in one of omestic support obligations, cruptcy case. | 7,575* or more?<br>or more payments and the<br>such as child support and | total amount you   |
| For the cal (January 1  Part 3: List  6. Are either                             | t Certain Payme  To Debtor 1's or Debtor  Neither Debtor 1 note in individual primariouring the 90 days in the second paid that a not include          | ents You M or 2's debts p or Debtor 2 h illy for a perso before you fil or each creditor creditor. Do r le payments | ade Before You Filed  primarily consumer debts?  as primarily consumer de  ponal, family, or household pled for bankruptcy, did you  por to whom you paid a total  not include payments for de  to an attorney for this bank | ebts. Consumer debts are deburpose."  pay any creditor a total of \$7  of \$7,575* or more in one of omestic support obligations, cruptcy case. | 7,575* or more?<br>or more payments and the<br>such as child support and | total amount you   |

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|----------------------------|---|---|--|--|--|
| Debtor 1                   | James First Name                                | Harold  Middle Name                             | Cooper  Last Name                                    | Case number (i   | f known)   |
| <b>-4</b>                  |   |   |  |  |  |
| <b>√</b> Yes.              |   |   | arily consumer debts.                                | ny creditor a total of \$600 or more?  |  |
|                            | No. Go to line 7.                               | -   | arikrupicy, did you pay ar                           | y creditor a total of \$000 of more:   |  |
|                            | _   |   |  |  |  |
|                            | include pa                                      |   | support obligations, suc                             | 00 or more and the total amount you paid tha<br>h as child support and alimony. Also, do not i   |  |
| Insiders inc<br>you are an | clude your relatives; a officer, director, pers | any general partners;<br>on in control, or owne | relatives of any general per of 20% or more of their | a a debt you owed anyone who was an insico<br>partners; partnerships of which you are a gen<br>voting securities; and any managing agent,<br>support obligations, such as child support an | eral partner; corporations of which including one for a business you |
| <b>√</b> No                |   |   |  |  |  |
| <del>_</del>               | _ist all payments to a                          | n insider                                       |  |  |  |
|                            | iot all paymonto to al                          | Timoladi.                                       |  |  |  |
| Include pay                | yments on debts guar                            | ranteed or cosigned b                           |  | s or transfer any property on account of a d   |  |
| ☐ Yes. L                   | ist all payments that                           | benefited an insider.                           |  |  |  |
|                            |   |   |  |  |  |
| Part 4: Id                 | lentify Legal Acti                              | ons, Repossessic                                | ons, and Foreclosure                                 | S  |  |
| contract dis               |   | ersonal injury cases,                           | small claims actions, div                            | orces, collection suits, paternity actions, supp   | port or custody modifications, and                                   |
| <b>Y</b> 165. I            | ill ill the details.                            |   | • •  |  | <b>.</b>   |
|                            |   | Nature  | of the case  | Court or agency  | Status of the case   |
| Case title                 | e Citadel Fede                                  | eral Mortg                                      | age Foreclosure                                      | Montgomery County Court of   | <b>✓</b> Pending   |
|                            | Credit Unior<br>James H Co                      |   |  | Common Pleas   | On appeal  |
| _                          |   | оре:  |  | Court Name   | Concluded  |
| Case nur                   | mber 2022-17149                                 |   |  | Number Street  | <del></del>  |
|                            |   |   |  | 011  | <del></del>  |
|                            |   |   |  | City State ZIP C   | code   |
|                            |   |   |  |  |  |
| 10. Within                 | 1 year before you file                          | ed for bankruptcy, w                            | as any of your property i                            | repossessed, foreclosed, garnished, attach   | ed, seized, or levied?   |
| _                          | hat apply and fill in th                        | e details below.                                |  |  |  |
| <b>√</b> No. G             | so to line 11.                                  |   |  |  |  |
| ☐ Yes. F                   | Fill in the information                         | below.  |  |  |  |
|                            |   |   |  |  |  |
|                            | 90 days before you f<br>nake a payment beca     |   |  | g a bank or financial institution, set off any   | amounts from your accounts or  |
| <b>√</b> No                |   |   |  |  |  |
| ☐ Yes. F                   | Fill in the details.                            |   |  |  |  |
|                            |   |   |  |  |  |

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|------------------------|--|---|----------------------------|--|-------------------------------|
| Debtor 1               | James                                    | Harold  | Cooper                     | Case number (if k  | nown)                         |
|                        | First Name                               | Middle Name                                       | Last Name                  |  |                               |
| appointed r            |  | ed for bankruptcy, wan, or another official?      |                            | n the possession of an assignee for the bene   | fit of creditors, a court-    |
| <b>√</b> No            |  |   |                            |  |                               |
| Yes                    |  |   |                            |  |                               |
| Part 5: Lis            | t Certain Gifts                          | and Contributions                                 |                            |  |                               |
| _                      | years before you f                       | iled for bankruptcy, c                            | lid you give any gifts wit | h a total value of more than \$600 per person?   | •                             |
| <b>√</b> No            |  |   |                            |  |                               |
| ☐ Yes. Fi              | Il in the details for e                  | each gift.  |                            |  |                               |
| 14. Within 2           | years before you f                       | iled for bankruptcy, c                            | lid you give any gifts or  | contributions with a total value of more than  | \$600 to any charity?         |
| <b>√</b> No            |  |   |                            |  |                               |
| Yes. Fi                | ll in the details for e                  | each gift or contributio                          | n.                         |  |                               |
| Part 6: Lis            | st Certain Losse                         | S   |                            |  |                               |
| 15. Within 1 gambling? | year before you fil                      | ed for bankruptcy or                              | since you filed for bankı  | uptcy, did you lose anything because of thef   | t, fire, other disaster, or   |
| <b>√</b> No            |  |   |                            |  |                               |
| Yes. Fi                | ll in the details.                       |   |                            |  |                               |
| Part 7: Lis            | it Certain Paym                          | ents or Transfers                                 |                            |  |                               |
| about seeki            | ng bankruptcy or p                       | reparing a bankrupto                              | cy petition?               | ing on your behalf pay or transfer any proper<br>ncies for services required in your bankruptcy.         | rty to anyone you consulted   |
| <b>√</b> No            |  |   |                            |  |                               |
| ☐ Yes. Fi              | ll in the details.                       |   |                            |  |                               |
| help you de            | al with your credite                     |   | ents to your creditors?    | ing on your behalf pay or transfer any proper  | rty to anyone who promised to |
| <b>✓</b> No            |  |   |                            |  |                               |
| ☐ Yes. Fi              | ll in the details.                       |   |                            |  |                               |
| ordinary co            | urse of your busing outright transfers a | ess or financial affairs<br>and transfers made as | s?                         | erwise transfer any property to anyone, other<br>anting of a security interest or mortgage on you<br>at. |                               |
|                        | Il in the details                        |   |                            |  |                               |
| ☐ res. Fi              | ll in the details.                       |   |                            |  |                               |

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|-------------------------------|---------------------------|---|-----------------------------|---|-------------------|--|
| Debtor 1                      | James                     | Harold  | Cooper                      | Ca  | ase number (if k  | nown)  |
|                               | First Name                | Middle Name                                     | Last Name                   |   |                   |  |
| (These are                    |                           | u filed for bankruptcy,<br>protection devices.) | did you transfer any pro    | perty to a self-settled trust or  | similar device o  | of which you are a beneficiary?                                |
| <b>√</b> No                   |                           |   |                             |   |                   |  |
| Yes. Fi                       | II in the details.        |   |                             |   |                   |  |
|                               |                           |   |                             |   |                   |  |
| Part 8: Lis                   | st Certain Finan          | ncial Accounts, Ins                             | struments, Safe Depo        | sit Boxes, and Storage L  | Jnits             |  |
| or transferre<br>Include chee | ed?<br>cking, savings, mo |   | nancial accounts; certifica | s or instruments held in your<br>tes of deposit; shares in banks        | _                 | our benefit, closed, sold, moved,<br>brokerage houses, pension |
| <b>√</b> No                   |                           |   |                             |   |                   |  |
| Yes. Fi                       | II in the details.        |   |                             |   |                   |  |
|                               |                           |   |                             |   |                   |  |
| 21. Do you valuables?         | now have, or did y        | ou have within 1 year                           | before you filed for bank   | ruptcy, any safe deposit box  | or other deposi   | tory for securities, cash, or other                            |
| <b>√</b> No                   |                           |   |                             |   |                   |  |
| Yes. Fi                       | II in the details.        |   |                             |   |                   |  |
| <b>√</b> No<br>☐Yes. Fi       | II in the details.        |   | ace other than your hom     | e within 1 year before you file   | d for bankrupto   | ry?  |
| 23. Do vou                    | hold or control any       | v property that someo                           | ne else owns? Include a     | ny property you borrowed fro  | m. are storing f  | or, or hold in trust for someone.                              |
| <b>∑</b> Í No                 |                           | ,         |                             | ,, p. sp.s., , s  | , <u>.</u> .      | ,  |
|                               | II in the details.        |   |                             |   |                   |  |
|                               | iii iii dotallo.          |   |                             |   |                   |  |
| Part 10: G                    | ive Details Abo           | out Environmental                               | Information                 |   |                   |  |
| For the purp                  | oose of Part 10, the      | e following definitions                         | apply:                      |   |                   |  |
| substan                       | ces, wastes, or ma        |   | , soil, surface water, grou | concerning pollution, contaminates and water, or other medium, included |                   |  |
|                               | ans any location, fa      |   | efined under any environ    | mental law, whether you now o   | wn, operate, or   | utilize it or used to own, operate,                            |
| ■ Hazarde                     |                           | s anything an environn                          | nental law defines as a ha  | zardous waste, hazardous sub  | ostance, toxic su | ubstance, hazardous material,                                  |
| •                             |                           |   | ou know about, regardle     | ss of when they occurred.   |                   |  |
| 24. Has any                   | governmental uni          | it notified you that you                        | ı may be liable or potent   | ally liable under or in violation                                       | n of an environ   | mental law?  |
| <b>√</b> No                   |                           | ,   | -                           |   |                   |  |
| ☐ Yes. Fi                     | II in the details.        |   |                             |   |                   |  |
|                               |                           |   |                             |   |                   |  |

Case 24-11994 Doc 1 Filed 06/11/24 Entered 06/11/24 12:35:25 Desc Main Page 43 of 44 Document Debtor 1 **James** Harold Cooper Case number (if known) \_ First Name Middle Name Last Name 25. Have you notified any governmental unit of any release of hazardous material? **✓** No Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓**No Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **✓** No Yes. Fill in the details below.

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| Debtor 1 | James      | Harold      | Cooper    | Case number (if known) |  |
|----------|------------|-------------|-----------|------------------------|--|
|          | First Name | Middle Name | Last Name | (                      |  |

| Part 12: Sign Below   |   |
|---|---|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |   |
| /S/ Lacey Cooper Signature of Proposed Next Friend of Debtor 1  Date 06/10/2024   |   |
| Did you attach additional pages to your <i>Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)?  ☑ No ☐ Yes  |   |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy fo  ✓ No  ✓ Yes. Name of person  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |